

<p><b>State of Alabama Unified Judicial System</b></p> <p>Form ARClvP-93 Rev. 5/99</p>	<p align="center"><b>COVER SHEET</b> <b>CIRCUIT COURT - CIVIL CASE</b> (Not For Domestic Relations Cases)</p>	<p>Case Number <b>CV</b> _____ . _____</p> <p>Date of Filing: _____ Month _____ Day _____ Year _____</p> <p>Judge Code: _____</p>
<b>GENERAL INFORMATION</b>		
<p>IN THE CIRCUIT COURT OF <u>MONTGOMERY</u>, ALABAMA</p> <p><u>DALLAS White</u> Plaintiff</p>		
<p>(Name of County) v. <u>STATE of Alabama - City, County of MONTGOMERY</u> Defendant</p>		
<p>First Plaintiff</p> <p><input type="checkbox"/> Business      <input checked="" type="checkbox"/> Individual  <input type="checkbox"/> Government      <input type="checkbox"/> Other</p>	<p>First Defendant</p> <p><input type="checkbox"/> Business      <input type="checkbox"/> Individual  <input type="checkbox"/> Government      <input type="checkbox"/> Other</p>	
<p><b>NATURE OF SUIT:</b> Select primary cause of action, by checking box (check only one) that best characterizes your action:</p>		
<p><b>TORTS: PERSONAL INJURY</b></p> <p><input type="checkbox"/> WDEA - Wrongful Death  <input checked="" type="checkbox"/> TONG - Negligence: General  <input type="checkbox"/> TOMV - Negligence: Motor Vehicle  <input type="checkbox"/> TOWA - Wantonness  <input type="checkbox"/> TOPL - Product Liability/AEMLD  <input type="checkbox"/> TOMM - Malpractice-Medical  <input type="checkbox"/> TOLM - Malpractice-Legal  <input type="checkbox"/> TOOM - Malpractice-Other  <input type="checkbox"/> TBFM - Fraud/Bad Faith/Misrepresentation  <input type="checkbox"/> TOXX - Other: _____</p>	<p><b>OTHER CIVIL FILINGS (cont'd)</b></p> <p><input type="checkbox"/> MSXX - Birth/Death Certificate Modification/Bond Forfeiture Appeal/ Enforcement of Agency Subpoena/Petition to Preserve  <input checked="" type="checkbox"/> CVRT - Civil Rights  <input type="checkbox"/> COND - Condemnation/Eminent Domain/Right-of-Way  <input type="checkbox"/> CTMP - Contempt of Court  <input type="checkbox"/> CONT - Contract/Ejectment/Writ of Seizure  <input type="checkbox"/> TOCN - Conversion  <input type="checkbox"/> EQND - Equity Non-Damages Actions/Declaratory Judgment/Injunction Election Contest/Quiet Title/Sale For Division  <input type="checkbox"/> CVUD - Eviction Appeal/Unlawful Detainer  <input type="checkbox"/> FORJ - Foreign Judgment  <input type="checkbox"/> FORF - Fruits of Crime Forfeiture  <input type="checkbox"/> MSHC - Habeas Corpus/Extraordinary Writ/Mandamus/Prohibition  <input checked="" type="checkbox"/> PFAB - Protection From Abuse  <input type="checkbox"/> FELA - Railroad/Seaman (FELA)  <input type="checkbox"/> RPRO - Real Property  <input type="checkbox"/> WTEG - Will/Trust/Estate/Guardianship/Conservatorship  <input type="checkbox"/> COMP - Workers' Compensation  <input type="checkbox"/> CVXX - Miscellaneous Circuit Civil Case</p>	
<p><b>ORIGIN (check one):</b></p> <p><input checked="" type="checkbox"/> INITIAL FILING  <input type="checkbox"/> REMANDED</p>	<p><input type="checkbox"/> APPEAL FROM DISTRICT COURT</p>	<p><input type="checkbox"/> OTHER: _____</p>
<p><b>HAS JURY TRIAL BEEN DEMANDED?</b>    <input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO</p> <p>Note: Checking "Yes" does not constitute a demand for a jury trial. (See Rules 38 and 39, Ala.R.Civ.P, for procedure)</p>		
<p><b>RELIEF REQUESTED:</b>    <input checked="" type="checkbox"/> MONETARY AWARD REQUESTED    <input type="checkbox"/> NO MONETARY AWARD REQUESTED</p>		
<p>ATTORNEY CODE: <u>3-11-06</u>    Date <u>3-11-06</u></p> <p><u>Dallas White</u> Signature of Attorney/Party filing this form</p>		
<p><b>MEDIATION REQUESTED:</b>    <input type="checkbox"/> YES    <input type="checkbox"/> NO    <input type="checkbox"/> UNDECIDED</p>		

State of Alabama Unified Judicial System	<b>SUMMONS</b> <b>- CIVIL -</b>	Case Number
Form C-34 Rev 6/88		
IN THE <u>Middle District</u> Plaintiff <u>DALLAS WHITE</u> <div style="text-align: center; margin-top: -20px;">  </div>		COURT OF <u>Montgomery</u> COUNTY
		v. Defendant <u>Montgomery City</u> <u>Montgomery County</u> <u>STATE OF Alabama</u>
<b>NOTICE TO</b> _____ <p>THE COMPLAINT WHICH IS ATTACHED TO THIS SUMMONS IS IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS. YOU OR YOUR ATTORNEY ARE REQUIRED TO FILE THE ORIGINAL OF YOUR WRITTEN ANSWER, EITHER ADMITTING OR DENYING EACH ALLEGATION IN THE COMPLAINT WITH THE CLERK OF THIS COURT. A COPY OF YOUR ANSWER MUST BE MAILED OR HAND DELIVERED BY YOU OR YOUR ATTORNEY TO THE PLAINTIFF OR PLAINTIFF'S ATTORNEY <u>REPRESENTED By Myself until An Attorney is Appointed</u> WHOSE ADDRESS IS <u>Dallas White 71474 MCDF P.O. Box 4559 Montgomery Al.</u> <span style="float: right;">06103</span></p> <p>THIS ANSWER MUST BE MAILED OR DELIVERED WITHIN _____ DAYS AFTER THIS SUMMONS AND COMPLAINT WERE DELIVERED TO YOU OR A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE MONEY OR OTHER THINGS DEMANDED IN THE COMPLAINT.</p>		
<b>TO ANY SHERIFF OR ANY PERSON AUTHORIZED by the Alabama Rules of Civil Procedure:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> You are hereby commanded to serve this summons and a copy of the complaint in this action upon the defendant.</li> <li><input type="checkbox"/> Service by certified mail of this summons is initiated upon the written request of _____ pursuant to the Alabama Rules of Civil Procedure.</li> </ul>		
Date _____	By: _____	
Clerk/Register		
<input type="checkbox"/> Certified Mail is hereby requested. <u>Dallas White</u> Plaintiff's/Attorney's Signature		
<b>RETURN ON SERVICE:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Return receipt of certified mail received in this office on _____ (Date)</li> <li><input type="checkbox"/> I certify that I personally delivered a copy of the Summons and Complaint to _____ in _____ County, Alabama on _____ (Date)</li> </ul>		
Date _____	Server's Signature _____	
Address of Server _____	Type of Process Server _____	